

## Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER <b>Tsedale Habtemariam(Bright AFH)</b>	LICENSE NUMBER <b>752575</b>
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**NOTE:** The term “the home” refers to the adult family home / provider listed above.

The scope of care, services, and activities listed on this form may not reflect all required care and services the home must provide. The home may not be able to provide services beyond those disclosed on this form, unless the needs can be met through “reasonable accommodations.” The home may also need to reduce the level of care they are able to provide based on the needs of the residents already in the home. For more information on reasonable accommodations and the regulations for adult family homes, see [Chapter 388-76](#) of Washington Administrative Code.

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### About the Home

**1. PROVIDERS STATEMENT (OPTIONAL)**

The optional provider’s statement is free text description of the mission, values, and/or other distinct attributes of the home.

**The home will continue to provide consistent services, a creative approach to care and higher quality of life that can provide peace of mind for our clients and their families. Our mission is to work hard each day to exceed the expectations of our clients.**

**2. INITIAL LICENSING DATE**

**02/13/2014**

**3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED:**

**21807 76<sup>th</sup> Pl West Edmonds WA, 98026**

**4. SAME ADDRESS PREVIOUSLY LICENSED AS:**

**N/A**

**5. OWNERSHIP**

- Sole proprietor
- Limited Liability Corporation
- Co-owned by:
- Other:

## Personal Care

“Personal care services” means both physical assistance and/or prompting and supervising the performance of direct personal care tasks as determined by the resident’s needs, and does not include assistance with tasks performed by a licensed health professional. (WAC 388-76-10000)

### 1. EATING

If needed, the home may provide assistance with eating as follows:

- \*Follow the kind of diet suppose to eat,**
- \*Allow enough time,offer choice or better time if they want to,**
- \*Supervising and cuing client who are at risk for choking/aspiration and feeding clients as idicating.**

### 2. TOILETING

If needed, the home may provide assistance with toileting as follows:

**When deemed appropriate by the provider, may provide the following**

- \*Reminding clients to use the rest room regularly**
- \*Supervis or provide stand-by assistant while toileting**
- \*Follow clients care plan daily activity living.**

### 3. WALKING

If needed, the home may provide assistance with walking as follows:

- \*Make sure clear the hallway, bed rooms,or living rooms area**
- \*encourage/support the best you can**
- \*Remind clients to use assistive devis.**

### 4. TRANSFERRING

If needed, the home may provide assistance with transferring as follows:

- \*When deemed appropriate by the provder,the adult family home may provide the follwing.**
- \*Supervision or stand by assist with transfers.**
- \*One person assistance with transefers**
- \*Provide hoyer lift transfers as indicated.**

### 5. POSITIONING

If needed, the home may provide assistance with positioning as follows:

**When deemed appropriate by the provider,the adult family home may provide the following**

- \*Cuieng and reminding clients to change poition or turn**
- \*Follow clients care plan**
- \*One peron asitance with changing possition or turning while in the bed or chair**

### 6. PERSONAL HYGIENE

If needed, the home may provide assistance with personal hygiene as follows:

**When deemed appropriate by the provider ,the adult family home may provide the following**

- \*Assitance with oral care**
- \*Assistance with shaving**
- \*Assistance with showers**
- \*Bed bath if client is unable to use shower.**

7. DRESSING

If needed, the home may provide assistance with dressing as follows:

- \*Give choice,privacy**
- \*Check weather condition.**
- \*Asistance with dressing**

8. BATHING

If needed, the home may provide assistance with bathing as follows:

- \*When deemed appropriate by the provider,the adult family home may provide the following**
- \*Supervision during showers.**
- \*Provide assitance with shower.**

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

- \*Bright adult family/staff will encourage clients to be as independent as posible.**

**Medication Services**

If the home admits residents who need medication assistance or medication administration services by a legally authorized person, the home must have systems in place to ensure the services provided meet the medication needs of each resident and meet all laws and rules relating to medications. (WAC 388-76-10430)

The type and amount of medication assistance provided by the home is:

- \*Reminding clients to take their medications on time.**
- \*Assist clients with administration of oral medications.**
- \*Total assistance with medication adminitrations.**

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

- Follow deligaters instruction.**

**Skilled Nursing Services and Nurse Delegation**

If the home identifies that a resident has a need for nursing care and the home is not able to provide the care per chapter 18.79 RCW, the home must contract with a nurse currently licensed in the state of Washington to provide the nursing care and service, or hire or contract with a nurse to provide nurse delegation. (WAC 388-76-10405)

The home provides the following skilled nursing services:

- The home is owned and managed by provider who has many years working in long term care experiance.**
- When deemed appropriate by provider may contract with a RN delegater for nurse deligation**

The home has the ability to provide the following skilled nursing services by delegation:

ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION

- \*The Provider will make sure, Cargivers should have appropriate training all the time.**

**Specialty Care Designations**

We have completed DSHS approved training for the following specialty care designations:

- Developmental disabilities
- Mental illness
- Dementia

ADDITIONAL COMMENTS REGARDING SPECIALTY CARE DESIGNATIONS

- \*When deemed appropriate by provider(Tsedale Habtemariam) may provide special care**
- \*Attention to client with diagnosis related to mental or dementia.**

### Staffing

The home's provider or entity representative must live in the home, or employ or have a contract with a resident manager who lives in the home and is responsible for the care and services of each resident at all times. The provider, entity representative, or resident manager is exempt from the requirement to live in the home if the home has 24-hour staffing coverage and a staff person who can make needed decisions is always present in the home. (WAC 388-76-10040)

- The provider lives in the home.
- A resident manager lives in the home and is responsible for the care and services of each resident at all times.
- The provider, entity representative, or resident manager does not live in the home but the home has 24-hour staffing coverage, and a staff person who can make needed decisions is always present in the home.

The normal staffing levels for the home are:

- Registered nurse, days and times: \_\_\_\_\_
- Licensed practical nurse, days and times: \_\_\_\_\_
- Certified nursing assistant or long term care workers, days and times: **When the provider is not present in the home, the provider will make sure appropriate days and time for long-term workers in the home**
- Awake staff at night
- Other: **When deemed appropriate by the provider, the AFH may have awake staff.**

ADDITIONAL COMMENTS REGARDING STAFFING

**Awake staff as needed.**

### Cultural or Language Access

The home must serve meals that accommodate cultural and ethnic backgrounds (388-76-10415) and provide informational materials in a language understood by residents and prospective residents (Chapter 388-76 various sections)

The home is particularly focused on residents with the following background and/or languages:

**Currently all residents are speak english, but the home has potential to accommodate other languages and also cultural foods.**

ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS

### Medicaid

The home must fully disclose the home's policy on accepting Medicaid payments. The policy must clearly state the circumstances under which the home provides care for Medicaid eligible residents and for residents who become eligible for Medicaid after admission. (WAC 388-76-10522)

- The home is a private pay facility and does not accept Medicaid payments.
- The home will accept Medicaid payments under the following conditions:

**The State law/DSHS approval..**

ADDITIONAL COMMENTS REGARDING MEDICAID

### Activities

The home must provide each resident with a list of activities customarily available in the home or arranged for by the home (WAC 388-76-10530).

The home provides the following:

**The provider will offer appropriate activities and consider clients preferences.**

ADDITIONAL COMMENTS REGARDING ACTIVITIES

**I will encourage residents to motivate more activitties,but,the home will follw residents care plan.**